



AMENDMENT TRANSMITTAL LETTER			DOCKET NUMBER: 66778-126 (P-UC 5016)	
SERIAL NO: 10/016,481	FILING DATE: November 1, 2001	EXAMINER: D. Jiang	GROUP ART UNIT:1646	
INVENTION: PROKINETICIN POLYPEPTIDES, RELATED COMPOSITIONS AND METHODS				

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

"EXPRESS MAIL" MAILING LABEL NUMBER: EV 3475464296

DATE OF DEPOSIT: May 12, 2003

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 C.F.R. 1.10 ON THE DATE INDICATED ABOVE, AND IS ADDRESSED TO: COMMISSIONER FOR PATENTS, P.O. BOX 1450 ALEXANDRIA, VA 22313-1450

Carrie Hines
(TYPED OR PRINTED NAME OF PERSON MAILING PAPER OR FEE)

Carrie Hines
(SIGNATURE OF PERSON MAILING PAPER OR FEE)

RECEIVED
MAY 15 2003
TECH CENTER 1600/2900

Transmitted herewith is a Response to a Communication mailed April 16, 2003, in the above-identified application, with attached Exhibits A through E.

- ☒ Small Entity status of this application has been established under 37 CFR 1.27.
- ☐ Petition for Extension of Time is enclosed (in duplicate).
- ☐ Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- ☒ No additional claims fee is required.
- ☐ An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	94	-	94	-	0	x	\$9	\$18	=	\$0.00	\$
INDEPENDENT CLAIMS	9	-	9	-	0	x	\$42	\$84	=	\$0.00	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO		\$140	\$280	=	\$0.00	\$
							TOTAL ADDITIONAL FEE			\$0.00	\$

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

Inventors: Zhou and Ehlert
Serial No.: 10/016,481
Filed: November 1, 2001
Page 2

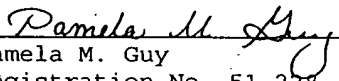
___ Please charge my Deposit Account No. 502624 the amount of \$_____. A duplicate copy of this sheet is enclosed.

___ A check in the amount of \$_____ is enclosed, \$_____ of which covers the fee for a _____-month extension of time.

X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,


Pamela M. Guy
Registration No. 51,228
MCDERMOTT, WILL & EMERY
4370 La Jolla Village Drive
7th Floor
San Diego, California 92122
858-535-9001